

What Is an Internist?

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AN internist may be defined as a physician who is skilled in the diagnosis of internal diseases and in their treatment by many and varied modalities, techniques, herbs and drugs, but not by cutting, lithotomy, couching for cataracts, male midwifery, barber-surgery or general surgery.

I do not lay claim to any skill in etymology nor to wisdom in either medical lore or history. However, my efforts to find the root or the date of birth of the word "internist" have left me with great respect for medical historians. But their erudition was so profound that they paid little attention to such a minor detail as the derivation of the word commonly used to designate a specialty. As a result it became a major task to find pertinent data on the origin of the term.

The word "medic" is derived from the Latin word "mederi" which means to heal. A medic is, therefore, a physician, a medical-man or a healer. The term "medical-man" is obviously a generic expression used to designate both physician and surgeon by means of classing both together as healers. Before the 15th Century, and perhaps much earlier, the word "medicine" was used approximately in the same sense as the French word "medecin" to mean a physician or healer, as in the following quotation from Shakespeare: "I have seen a medicine that's able to breathe life into a stone." The term "medicine" was also used in early Anglo-French medical writings to connote the phenomenon of curing or healing by medicines, as in the famous quotation from Shakespeare: "Not Poppy, nor mandragora . . . shall ever medicine thee to that sweet sleep which thou ow'dst yesterday."

The word "physician" is derived without doubt from the Latin word "physica" which means knowledge of nature and natural phenomena. Just how this word came to refer to medicine is not entirely clear. Before 1400 A.D., Chaucer wrote "Farewel Phisik; go ber the man to Chirche." At about the same time the following quotation appeared and I have lifted it from the pages of the Oxford Dictionary: "O Lord, whi is it so greet difference betwixe a cirurgian & a physician." Thus very early in our language and in the Anglo-French dialects the word "physician" was used as an appellation for a healer; a man with a knowledge of nature as distinguished from one qualified as a surgeon only.

The word surgeon is derived from an old Anglo-French word "surgien" apparently introduced much later into medical lore and history than either the word "medicine" or the appellation "physician." The Greek root from which the word "surgeon" had its origin means handwork or manual skill and thus

the surgeon is one who treats diseases by manual methods or by operative or instrumental modalities.

The barber was at first employed to function as an ancillary service of the Church, since he was skilled primarily in shaving the heads of the monks. Gradually he learned to use his tools for other purposes, possibly more lucrative, and he became a barber-surgeon, a trade or profession which dominated for a time all surgery and was controlled in turn by the Church and its papal bulls. The strife and rivalry between the physicians, surgeons, and barbers continued well into the 17th Century, and in certain areas into the 18th Century. The barbers irritated the surgeons, but the surgeons, even after much strife and struggle, did not get rid of them until 1745. "When the surgeon was in a manner, assimilated to the status of the physician, he began to put on airs like the latter" and Patin, dean of the Paris Faculty, called him "an evil, extravagant coxcomb who wears a mustache and flourishes a razor." One may easily comprehend how medicine of the kind practiced by the barber-surgeon and the peripatetic criminals, rogues, and vagabonds, who had learned from the barber to make a living as cataract-couchers, lithotomists, herniotomists and booth-surgeons, came to be called "external" medicine in contradistinction to "internal" medicine which was the medicine of the physician and the medicine of the haughty, learned professor and at that time the only practice of medicine not subject to the dictates of papal bulls.

The word "internist" does not appear in the Shorter Oxford Dictionary nor is any explanation made of the use of the term "internal medicine." In Webster's Unabridged Dictionary the statement is made that the word "internist" is probably derived from the root "intern-" taken from the designation "internal medicine." This leads one to consider, probably with a reasonable degree of certainty, that the word "internist" came into general use later than the appellation "internal medicine." The word "internist" is doubtless unrelated to the term "intern" which is defined as an assistant physician who resides in a hospital, in contrast to the word "extern" which is usually applied, medically, to a physician who works in but does not reside in a hospital.

In a personal letter to me Dr. George Blumer stated that "the use of the term 'internal medicine' goes back a long time, how long I do not know, and I predict that it would take considerable bibliographic research to settle the matter, if it could be definitely decided at all." I can testify to the probable truth of his prediction, for I have not been able to find any date on which the term "internist" first definitely appeared in medical writings. The

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inability to fix dates definitely in the history of science is a frequent difficulty because, unlike politics, great and violent changes do not occur to fix the dates of more commonplace events such as the introduction of a new term into medical literature. Be that as it may, one can feel certain that the term "internist" was coined in the period of wrangling between the physician and the barber-surgeon combination, surely before the year 1745 when the barber-surgeon disappeared from England.

Consideration of the scanty data which are available may clarify the atmosphere for a discussion of the chief problem, *videlicet*, what is an internist? The roots of the dissatisfaction with the word "internist" as the designation for a great medical specialty are two. First the term is not sufficiently descriptive and, second, it means little or nothing to the average or even the intelligent layman. Furthermore, under the designation "internal medicine" are included a number of other specialties known by terms in no way derived from the words "internal medicine." These subspecialties are psychiatry, neurology, dermatology, allergy, cardiology, gastroenterology, hematology, endocrinology and a few others. With few exceptions most physicians who claim to be specialists in one or another of these subspecialties are actually spending some or much of their time in some other variety of general medical practice than their designated specialty. This situation as well as certain other compelling circumstances has made it seem desirable for the specialty boards to require adequate training in internal medicine and certification by the Board of Internal Medicine before an applicant may be examined to become a diplomate of one of the subspecialties of internal medicine.

I may now pose the question which is also the title of this paper: What is an internist? Either he is a specialist in what remains of internal medicine after all the subspecialists have taken their particular groups of patients out of the broader field of internal medicine, or he is a physician of superior intelligence and experience who is capable of posing as a specialist in the whole field of internal medicine, or he is a physician who has limited his practice to one of the subspecialties of internal medicine.

The layman will certainly not understand this bizarre situation and in most instances when illness comes to him or his family he will request consultation with either a specialist or a diagnostician. I have observed on innumerable occasions that under such circumstances he will never request consultation with an internist since he does not understand the meaning of that designation.

The word "internist" is unsatisfactory for reasons already set forth and for a number of others which will be considered now. Since an internist is actually a physician skilled in the techniques of internal medicine, the word "diagnostician" might be used as a more appropriate designation. This term, however, is too restricted because any internist has many more duties than simply those of a specialist

who makes a diagnosis. Furthermore, the word "diagnostician" is too austere and rigid in its implications. The expression "specialist in internal medicine" is too cumbersome and unwieldy for practical use although it is entirely accurate in meaning and connotes exactly what an internist is or should be. In addition, it contains the important word "specialist," which must be the *sine qua non* of any expression used as a satisfactory substitute for the word "internist."

At present there are three fundamental branches of the practice of medicine—medicine, surgery and general practice. And the practitioners in these branches are medical specialists, surgical specialists, and general practitioners. These terms used to designate the three essential branches of medicine are short and have the proper connotation and, in addition, are historically and etymologically correct. They are comprehensible to the layman and to the non-medical scientist.

How can these terms be applied to the nomenclature of the Board of Internal Medicine? This seems very simple. A successful candidate becomes a diplomate of the Board of Medical Specialists. Before a candidate can be certified in one of the subspecialties of internal medicine he must have qualified as a medical specialist by successfully passing the examination of the Board of Medical Specialists. Then, if he is successful in passing the examination of the subspecialty board, he becomes a medical specialist in allergy or cardiology or gastroenterology as the case may be. Thus it becomes obvious that his certification denotes that he is primarily a medical specialist and secondarily an expert in one of the lesser specialties within the scope of internal medicine. The Board of Internal Medicine has already issued a listing of diplomates with the title "Directory of Medical Specialists."

I have stated the problem and I believe it is perfectly clear that there is a real problem and that its solution would be desirable. The best solution which seems adequate at this time has been presented.

The answer to the question, "What Is an Internist?" may now be given without detriment to the historical and etymological aspects of the terms employed. An internist is a medical specialist in contradistinction to a surgical specialist and he practices internal medicine as distinguished from external medicine. The terms "internist" and "internal medicine" were probably used first early in the modern era to differentiate the physician who studied and treated internal affections from the barber-surgeons and surgeons who treated external diseases, since even as late as 1766 "surgical practice was mainly in the hands of the barber, the executioner, and the strolling bone-setters, cataract-couchers, herniotomists and lithotomists, of whom the famous Dr. Eisenhart was the type."¹

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REFERENCE

1. Garrison, F. H.: History of Medicine, Philadelphia and London, W. B. Saunders Co., 1929, p. 395.